County: Douglas VILLA MARINA HEALTH/REHAB 35 NORTH 28TH STREET SUPERIOR 54880 Ownership:
Highest Level License:
Operate in Conjunction with CBRF?
Title 18 (Medicare) Certified? Corporati on Skilled No Yes Average Daily Census: 70

Services Provided to Non-Residents	Age, Sex, and Primary Diagn	Length of Stay (12/31/0	0) %				
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year	36. 1
Supp. Home Care-Personal Care	No	B 1 2 2 1 B 1 1 1 1 1 1 1 1 1 1 1 1 1 1		** 1		1 - 4 Years	52. 8
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	2.8	More Than 4 Years	11. 1
Day Servi ces	No	Mental Illness (Org./Psy)	9. 7	65 - 74	5. 6		
Respite Care	No	Mental Illness (Other)	2.8	75 - 84	33. 3		100. 0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	45.8	*********	******
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & 0ver	12. 5	Full-Time Equival	ent
Congregate Meals	No	Cancer	6. 9			Nursing Staff per 100	Resi dents
Home Delivered Meals	No	Fractures	6. 9		100.0	(12/31/00)	
Other Meals	Yes	Cardi ovascul ar	11. 1	65 & 0ver	97. 2		
Transportation	No	Cerebrovascul ar	16. 7			RNs	9. 9
Referral Service	No	Di abetes	4. 2	Sex	%	LPNs	10. 3
Other Services	No	Respi ratory	2. 8			Nursing Assistants	
Provi de Day Programmi ng for	İ	Other Medical Conditions	38. 9	Male	20. 8	Aides & Orderlies	45. 0
Mentally Ill	Yes			Female	79. 2		
Provi de Day Programming for	İ		100. 0				
Devel opmentally Disabled ************************************	No				100. 0		

Method of Reimbursement

	Medicare (Title 18)			Medicaid (Title 19)			Other P		Private Pay			Manageo	d Care	Percent			
	Per Diem			em	Per Diem		Per Diem			Per Diem		Per Diem Total			Of All		
Level of Care	No.	%	Rate	No.	%	Rate	No.	%	Rate	No	. %	Rate	No.	%	Rate	No.	Resi dents
Int. Skilled Care	0	0.0	\$0.00	4	8. 3	\$128. 33	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	4	5. 6%
Skilled Care	8		\$222.05	43	89. 6	\$110.96	ŏ	0. 0	\$0.00	16		\$143.00	ŏ	0. 0	\$0.00	67	93. 1%
Intermediate				1	2. 1	\$93.60	0	0. 0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	1	1.4%
Limited Care				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Personal Care				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Residential Care				0	0.0	\$0. 00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Dev. Di sabl ed				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Traumatic Brain In		0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Ventilator-Depender	nt 0	0.0	\$0. 00	0	0.0	\$0. 00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Total	8	100.0		48	100. 0		0	0.0		16	100.0		0	0.0		72	100.0%

Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/00 Admissions, Discharges, and Deaths During Reporting Period % Needi ng Total Assistance of Activities of Percent Admissions from: % Totally Number of Private Home/No Home Health 9. 2 Daily Living (ADL) Independent One Or Two Staff Resi dents Dependent 2. 8 2. 8 Private Home/With Home Health 0.0 Baťhi ng 87.5 9. 7 72 Other Nursing Homes 3.4 Dressing 87.5 9. 7 72 Acute Care Hospitals
Psych. Hosp. - MR/DD Facilities
Rehabilitation Hospitals 86. 2 Transferring 6.9 83.3 72 9. 7 72 83.3 9.7 0.0 Toilet Use 88.9 72 1. 1 6. 9 Other Locations ****** 0.0 Total Number of Admissions 87 Continence Special Treatments Receiving Respiratory Care
Receiving Tracheostomy Care
Receiving Suctioning
Receiving Ostomy Care Percent Discharges To: Indwelling Or External Catheter 5.6 2.8 Private Home/No Home Health 33. 3 Occ/Freq. Incontinent of Bladder 54. 2 0.0 Private Home/With Home Health 9. 2 Occ/Freq. Incontinent of Bowel 29. 2 1.4 Other Nursing Homes 4.6 6. 9 Acute Care Hospitals
Psych. Hosp. - MR/DD Facilities
Rehabilitation Hospitals Receiving Tube Feeding Receiving Mechanically Altered Diets 25.3 Mobility 0.0 Physically Restrained 8.3 0.0 27.8 0.0 Other Locations 2.3 Skin Care Other Resident Characteristics 25. 3 4. 2 Deaths With Pressure Sores Have Advance Directives 56. 9 Total Number of Discharges With Rashes 0.0 Medications Receiving Psychoactive Drugs (Including Deaths) 59.7

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

		Ownershi p:		Bed	Si ze:	Li ce	ensure:		
	This Proprietary			50-	. 99	Ski l	l ed	Al l	
	Facility	ility Peer Group			Group	Peer Group		Facilities	
	%	%	Ratio	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	97. 2	82. 5	1. 18	87. 3	1. 11	84. 1	1. 16	84. 5	1. 15
Current Residents from In-County	97. 2	83. 3	1. 17	80. 3	1. 21	83. 5	1. 16	77. 5	1. 25
Admissions from In-County, Still Residing	28. 7	19. 9	1. 44	21. 1	1. 36	22. 9	1. 26	21. 5	1.34
Admissions/Average Daily Census	124. 3	170. 1	0. 73	141.8	0. 88	134. 3	0. 93	124. 3	1.00
Discharges/Average Daily Census	124. 3	170. 7	0. 73	143. 0	0.87	135. 6	0. 92	126. 1	0. 99
Discharges To Private Residence/Average Daily Census	52. 9	70.8	0. 75	59. 4	0. 89	53. 6	0. 99	49. 9	1.06
Residents Receiving Skilled Care	98. 6	91. 2	1. 08	88. 3	1. 12	90. 1	1. 09	83. 3	1. 18
Residents Aged 65 and Older	97. 2	93. 7	1. 04	95.8	1.01	92. 7	1. 05	87. 7	1. 11
Title 19 (Medicaid) Funded Residents	66. 7	62. 6	1. 07	57. 8	1. 15	63. 5	1. 05	69. 0	0. 97
Private Pay Funded Residents	22. 2	24. 4	0. 91	33. 2	0. 67	27. 0	0.82	22. 6	0. 98
Developmentally Disabled Residents	0. 0	0.8	0.00	0. 7	0.00	1. 3	0.00	7. 6	0.00
Mentally III Residents	12. 5	30. 6	0.41	32. 6	0. 38	37. 3	0. 34	33. 3	0. 37
General Medical Service Residents	38. 9	19. 9	1. 95	19. 2	2. 02	19. 2	2. 02	18. 4	2. 11
Impaired ADL (Mean)	52 . 5	48. 6	1.08	48. 3	1. 09	49. 7	1.06	49. 4	1.06
Psychological Problems	59. 7	47. 2	1. 27	47. 4	1. 26	50. 7	1. 18	50. 1	1. 19
Nursing Care Required (Mean)	5. 4	6. 2	0. 87	6. 1	0.89	6. 4	0.84	7. 2	0.75